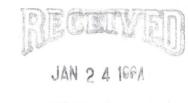


## STATE OF UTAH DEPARTMENT OF NATURAL RESOURCES

## DIVISION OF OIL, GAS AND MINING

355 West North Temple 3 Triad Center, Suite 350 Salt Lake City, Utah 84180-1203 Telephone: (801) 538-5340 Fax: (801) 359-3940



DIVISION OF OIL, GAS & MINING

## ANNUAL REPORT OF MINING OPERATIONS

The informational requirements of this form are based on provisions of the Mined Land Reclamation Act, Title 40-8, Utah Code Annotated 1953, as amended, and the General Rules as promulgated under the Utah Minerals Regulatory Program. An operator conducting mining operations under a Notice of Intention must file an annual operations and progress report (FORM MR-AR) with the Division.

| I.  | Gener | al Information  |
|-----|-------|---|
|     | 1.    | Report Time Period: From (mo./yr.) $\frac{1-1-93}{}$ To (mo./yr.) $\frac{12-31-93}{}$ |
|     | 2.    | DOGM File Number (Mine No): S /015 /041   |
|     | 3.    | Mine Name:DKG Quarry  |
|     | 4.    | Mineral(s) Mined (or permitted to mine): Gypsum Rock                                  |
|     | 5.    | Type of mine   ☐ Surface Mine or ☐ Underground Mine                                   |
|     | 6.    | Legal Description (Location of Lands Affected):                                       |
|     |       | NE 1/4, SW 1/4, Section 29 , Township 225 , Range 9E                                  |
|     |       | NE 1/4, SW 1/4, Section 29 , Township 225 , Range 9E                                  |
|     |       | 1/4,1/4, Section, Township, Range   |
|     | 7.    | Name of Operator or Company:Diamond K (Phillip Palmer)                                |
|     | 8.    | Permanent Street Address: 234 North 500 West  |
|     |       | City, State, Zip: Richfield, Ut 84701   |
|     |       | Phone: 801-896-8870   |
|     | 9.    | Company Representative (or designated operator):                                      |
|     |       | Name: Phillip Palmer  |
|     |       | Title:Owner   |
|     |       | Business Address: 234 North 500 West  |
|     |       | City, State, Zip: Richfield, Ut 84701   |
|     |       | Phone: 801-896-6622   |
|     |       | Please check if any of the above information has changed since previous year.         |
| II. | Minin | ag and Reclamation  |
|     | 1.    | Was the mine active during the past year? Yes ₹ No □                                  |
|     | 2     | If active how much one or mineral was mined?  |

| 4. Briefly describe any new or additional surface disturbances that occurred during the past year. This description should include the type of work performed, and volume of material moved. |              |
|--|--------------|
| F  |              |
| All operations were confined to the 5 acres of existing  | g            |
| disturbed area previous to 1993. No new are was distu  | rbed         |
| 5. How much acreage was reclaimed during the past year?  | <del>-</del> |
| 6. Briefly describe the reclamation work performed during the past year. This description should include methods employed, and an evaluation of the results.                                 |              |
| We have removed the rock fines and prepared the norther  | ast          |
| corner for reclamation.  | _            |
|  | _            |
| 7. What is the total disturbed acreage at years end? <u>5 acres</u>  | •            |
| 8. Briefly summarize any mining and/or reclamation plans for the upcoming year.  |              |
| 1. To continue to mine in a southwestern direction   | _            |
| and finish the reclamation on the northeast corner.  |              |
| NOTE: Section III., "Additional Information" applies only to <u>large mining operations</u> .  |              |
| III. Additional Information  |              |
| <ol> <li>An updated surface facilities map should be attached if there have been significant changes s previous map was submitted.</li> </ol>  | ince the     |
| 2. Any monitoring results or other reports that are required under the terms of the approved no intention should also be attached.   | tice of      |
| IV. Signature Requirement  |              |
| I hereby certify that the foregoing is true and correct.   |              |
| Name (Typed or Print): Phillip Palmer  |              |
| Title of Operator: Owner   |              |
| Signature of Operator:   |              |
| Date: 1-20-94  |              |

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